FOR INST	RUCTIONS	SEE BACK	OF FORM
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DISCLOSURE SUMMARY PAGE

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FORM
DR-2

DISCLOSURE

Iowa Federation of Labor	AFI CTO City Centifatill	aids bi	(4). 12/2005) REPORT		
Iowa Federation of Labor, Fund, 300 E. Locust - #260	Des Moines, IA	门方像	Office Use Only Smile Graph Graph		
IMPORTANT: Indicate by # type of committee you are re		R' AME	4133		
(1)Statewide/Legislative/Judge Standing for Retention C	andidate (2)State DAC (2)Core Date	- ^ 	gged in <u>S</u>		
(*)County Central Committee (5)County Candidate / 6	City Candidate /7 \Cabast Basel as Otto	So	anned		
Political Subdivision Candidate (8) County PAC (9) Cit Subdivision PAC (11) Local Ballot Issue	y PAC (10)School Board or Other Political	Co	mputer		
CANDIDATE COMMITTEES ONLY:		= Au	dited		
Candidate Name	Political Party (if applicable)				
	(i applicable)	1 1	File with: owa Ethics and Campaign		
Office Sought	District GE County and I was		Disclosure Board		
•	District (if Senate or House)		10 E. 12 th , Ste. 1A		
			Des Moines, Iowa 50319 Fax: 515-281-3701		
Late reports are subject to possible civil and criminal pend the candidate, for a candidate's committee, and the chair	atties. Pursuant to lowa Code section 68B.32A	./7\			
ndividual responsible for filing timely and accurate report	s.				
diane Smith	265-1862		7-14-08		
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE SIGNED		
Statewide PAC					
AM FILING A 5/15/08 to 7/14/08	REPORT FOR (1) ELECTION ((2))	NON ELEC	TION VEAD		
(report date)	Indicate by #		HON YEAR,		
CHECK IF AMENDMENT TO REPORT DATED	•				
JOHNSON FAMILIANIEM TO KEPOKI DATED	<u> </u>	ocal Comr	nittees, enter Date of Election		
Check if this is final (termination) report and attach Noti	on of Dissolution Farm DD 0				
(You must continue to file reports until a DR-3 is	filed.)	ounty & Lo	ocal Committees, enter County in		
,	W	hich Elect	ion is held		
	Ĺ_				
STA	TEMENT OF CASH ON HAND				
ASH ON HAND at the beginning of the reporting period.					
committee. This amount MUST be the same as t	he cash on hand at the end		0200 72		
of the last reporting period or must be zero if this	s is first report filed.)	\$	8289.72		
ADD TOTAL MONEY TAKEN IN THIS PERIOD					
Schedule A: Cash Contributions total (Attach Sc	hedule A) (*also see in-kind below)		400.63		
Schedule F: Loans Received total (Attach Sched					
Schedule H: Total Sales of Campaign Property (Attach Schedule H)				
(Schedule H applies to Candidates'					
	SUB-TOTAL	\$	8690.35		
SUBTRACT TOTAL MONEY SPENT THIS PERIO					
Schedule B: Expenditures total (Attach Schedule			0		
Schedule F: Loan Repayments total (Attach Sche					
ASH ON HAND at the end of this reporting period (if final		••••••			
be zero) (Attach DR-3)	epon balance must	\$	8690.35		
INPAID BILLS (From Schedule D - Attach Schedule D)					
KIND CONTRIBUTIONS (From Schedule E - Attach Sche					
DUTSTANDING LOANS (From Schedule F - Attach Sched					
ONSULTANT BREAKDOWN (Schedule G Attached?)	uie : j		•		
ANDIDATE COMMITTEES ONLY:			YESNO		
ALUE OF CAMPAIGN PROPERTY (From Schedule H - Att	ach Schedule H)	e.			

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization) South Central Iowa Federation of Labor, AFL-CIO Citizenship Fund, 300 E. Locust - #260 Des Moines. IA #50309
Committee NAME (Must be same as on Statement of Organization) South
Central lowa rederation of Labor Arterior
Citizenship Fund 300 F Locust #260 Dog
Tarrell Tarrel
MOTHES: IA 50309

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS		
CHECK THIS BOX IF AMENDING FORM			

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOF FUND- RAISER
5/28/ 08	CK# 3095	South Central Iowa Federation of Labor, 300 E Locust - #260, DM, 1A 50309 Transfer General Acct. 5/08		\$ 218.28	INCOME
6/27 08	ID# CK# 3124	Same as Above Transfer General Acct. 6/08		182.35	
	ID#				
	CK#				
<u> </u>	ID#				
	CK#				
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	ID#				
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	ID#				
	CK#				
			SUB-TOTAL	400.63	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)